PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10714625

		CLAIMS A	- PART in 1)		umn 2)	٠.	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY			
TOTAL CLAIMS			12					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			\2_ minus 20=		. ф		,	<\$ 9 ₌		OR	X\$18=	6	
INDEPENDENT CLAIMS			6	6 minus 3 = 1		* 3		<43=		OR	X86=	823	
М	ULTIPLE DEPE	ENDENT CLAIM F	RESENT	·			+	145=		OR		4	
* [f the differenc	e in column 1 is	less than z	ero, enter	"0" in	'0" in column 2		OTAL		OR	TOTAL	1028	
			AMENDE	ENDED - PART II				SMALL ENTITY O			OTHER THAN SMALL ENTITY		
-	<u> </u>	(Column 1)	(Colum				SMALL		ENTITY	OR	SMALL	ENIIIY	
AMENDMENT A	· .	CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA	F	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .	×	\$ 9=		OR	X\$18=		
	Independent	* ENTATION OF M	Minus	***	01.414.4	=	X43=	43=		OR	X86=		
L	rino i Prizo	ENTATION OF M	OLTIPLE DE	PENUENT	CLAIM		+1	45=		OR	+290=		
							L	TOTAL		100	TOTAL		
	•							IT. FEE		OR	ADDIT. FEE		
		(Column 1)	(Column 3)										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY.	PRESENT EXTRA	R.	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	** .	•	=	X	§ 9=		OR	X\$18=		
	Independent	*	Minus	***		=	X	43=		OR	X86=		
	FIRST PHESE	NIATION OF MU	JUIPLE DEF	LTIPLE DEPENDENT						1			
			•				L	45=		OR	+290=		
	,							TOTAL T. FEE		OR ,	TOTAL ADDIT, FEE	· ·	
		(Column 1)		(Colum	n 2)	(Column 3)		•					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA	RA	ATE :	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
AME.	Independent	*	Minus	# * *		=	X4	3=		OR	X86=	,	
	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM								
• 11	• If the entry in column 1 is less than the entry in column 2 write "0" is column 2									OR	+290=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE ADI													